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ABSTRACT

This study assessed the readiness and practice of specialist-level training programs in school psychology to address the preservice training needs in the area of school violence and youth gang prevention. A survey of 189 programs yielded 90 useable replies describing their training programs. Most of these programs were located in or near midsize cities with populations ranging from 100,000 to one million. Results indicate that training in violence and gang issues lags behind other areas of behavioral prevention and intervention. Required discrete or integrated course work was dominate by direct treatment and consultation for attention deficient hyperactivity disorder and treatment and consultation for conduct problems. Also prioritized were social skills training and treatment and consultation for depression. Gang prevention represented only 29% of discrete training, while gang treatment was only 17% of discrete training. Violence prevention was covered in the course work of 67% of the programs, in practica for 37% of programs, and in internships of 43% of programs. However, 49% of respondents agreed that understanding of youth gangs is an appropriate area of preparation for nondoctoral school psychologists. While training in gang prevention and intervention is recognized as a need for school psychologists, such training lags behind most other areas in which training is provided. (Contains 3 tables and 13 references.) (SLD)

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School Psychology Training in Violence Prevention and Intervention

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School Psychology Training in Violence Prevention and Intervention

The extent of youth violence and gang involvement in America has been the subject of analysis and discussion in the recent professional literature (see American Psychological Association, 1993; Eron, Gentry, & Schlegel, 1994). Responding to the "troubling national problem of violence involving youth," the Commission on Violence and Youth of the American Psychological Association (1993, p.5) recommended 10 areas for specific effort, including both early childhood and school-based interventions. The level of increasing concern regarding school-based violence led the National Education Goals Panel (1993) to include as one of the six national goals: "By the year 2000, every school in America will be free of drugs and violence and will offer a disciplined environment conducive to learning." Well into the the decade of the 1990's, America has more youth gangs, more gang member drug involvement, and more gang violence than ever before. The current gang phenomenon stretches from the major cities to suburban and rural areas (Goldstein & Soriano, 1994). Consequent to these concerns, recent literature has called for school psychologists to become active in violence prevention and gang intervention efforts in the school setting (e.g., Hughes & Hasbrouck, 1996; Morrison, Furlong, & Morrison, 1994.)

School psychologists have long been aware that aggressive student behavior diverts teachers from classroom instruction and causes them to spend excessive time in disciplinary efforts (Lochman, Lampron, Gemmer, & Harris, 1987). Additionally, the suspected relationship between aggression toward persons in school and low self-esteem, academic frustration, emotional disturbance, and drug and alcohol abuse (Goldstein, 1994) would, on the surface, appear to make the behavior one of natural concern for school psychologists. While school psychologists are regularly called upon to assist in the problem of aggressive, violent children and youth, most frequently it is in conjunction with their diagnostic roles relative to special education. Aggression as an either a direct or indirect intervention concern has had less of an impact on school psychological practice. In a study of school psychological practice in nonurban school districts, 57% of the respondents reported that "a behavioral conference with the administrator" was the most common response to chronic aggressive student behavior, with individual counseling reported as the most frequent response by less than 5% (Larson, 1993). Morrison, Furlong, and Morrison (1994) hypothesized that the barrier to more active involvement has been in part due to the focus on the criminal aspects of school violence and as a consequence, school psychologists may have deferred responsibility for "interventions" to administrators and police.

An additional explanation for the apparent lack of involvement may lie in the scope and substance of preservice training in school psychology. Training programs in school psychology tend to design their program content based on a) feedback from practitioners regarding what skills they need to perform their work tasks, b) what university faculty believe ought to be taught, and c) what state and federal legislation and professional accreditation bodies say they must include (Curtis & Batsche, 1991). Additional influences arise from economic factors which may include the size and qualifications of the available teaching faculty and availability of grant monies in specific areas germane to school psychology preparation. Specialist-level training typically consists of core psychology, assessment, intervention, and professional course work, with doctoral-level on average adding additional course work in the core psychology and professional areas (Fagan & Wise, 1994). Specialist-level preparation is more highly influenced by state credentialing regulations. Training programs are often attempting to maintain a reasonable credit-hour limit while trying to adhere to both state certification and (often) NASP-accreditation requirements. New course work in an area not specifically addressed by state or profession accreditation requirements may create a particular challenge. The current study sought to assess the readiness and practice of specialist-level training programs in school psychology to address the preservice training needs in the area of school violence and youth gang prevention.

Method

Participants and Procedure

A listing of school psychology training programs was obtained through the National Association of School Psychologists (NASP). A survey was designed and a pilot study conducted with a sample of training programs located in Wisconsin (N = 7). The subsequent final survey was mailed in the fall of 1996 with follow-up in the spring of 1997 to the directors of 215 programs in the United States. Twenty-four PhD or PsyD programs were eliminated because they did not specifically train at the master's or specialist levels, and two programs were discontinued. Of the 189 appropriate programs, 97 responded to the survey, yielding a response rate of 51%. Of these surveys, seven were excluded due to incompleteness, thereby yielding a final sample of 90 programs. As presented in Table 1, the majority of programs were located in or near midsize cities with populations ranging from 100,000 to one million. The largest population served by practicum and internship placements were blue collar families (51%), followed by lower SES and middle/upper SES placements. Respondents were asked to indicate the level and setting (i.e., coursework, practicum, or internship) of training offered for a variety of behavior problems. Respondents specifically indicated for each behavior whether discrete coursework or integrated instruction was: (a) required; (b) elective; (c) not offered but within the purview of nondoctoral school psychology preparation; or (d) not within the purview of master's/specialist level training. Respondents also were asked to rate on a 4-point scale their level of agreement with several items pertaining to discrete training, integrated training, and continuing education to provide information on program philosophies regarding training in gang and violence interventions.

Results and Discussion

The results indicate training in violence and gang issues lags behind other areas of behavioral prevention and intervention. As presented in Table 2, required discrete or integrated course work was dominated by direct treatment and consultation for ADHD (84% and 87%), and treatment and consultation for conduct problems (86% and 89%). Also prioritized were social skills training (81%) and treatment and consultation for depression (80%). Interestingly, parent training for ADHD and conduct problems were high priorities (65%), but to a lesser degree than child focused intervention. Of particular interest for the stated purpose of this study was the finding that the lowest levels of discrete training were gang prevention (29%) and treatment (17%), and AODA treatment (26%). Several programs also indicated gang prevention (11%) and treatment (15%) were not within the purview of nondoctoral preservice training in school psychology.

The setting for training followed a similar trend, with training in treatments for ADHD, conduct problems, and depression receiving the most coverage across course work, practica, and internships. Preservice preparation in gang and violence interventions were again offered less freqently than the other categories of behavior. Specifically, violence prevention was covered in course work of 67% of the programs, in practica of 37% programs, and in internships of 43% of the programs. Training in gang prevention and intervention again were the least well covered in course work (49% and 38%), practica (22% and 30%), and internship (30% and 26%) settings.

As presented in Table 3, 49% of respondents agreed that an understanding of youth gangs is an appropriate area of preparation for nondoctoral school psychologists. There were differences, however, regarding the training deemed appropriate for gang versus school violence prevention and intervention. Specifically, respondents tended to endorse agreement for training in school violence intervention more frequently than for gang intervention. Discrete course work received the fewest agreement ratings as an appropriate method for training in gang (13%) and violence (36%) intervention, and the highest disagreement ratings. More respondents agreed gang (43%) and violence (65%) intervention training should be integrated into existing preservice training, with

agreement or agreement with reservations of 87% for gang intervention and 98% for violence prevention. Finally, many respondents indicated that training programs should provide continuing education for gang (45%) and violence (59%) intervention, with 34% indicating their program had sponsored a continuing education opportunity for practitioners in violence prevention, and 15% providing continuing education for gang intervention.

A chi square test for association was conducted to test the prediction that school psychology programs located near larger metropolitan areas would be more likely than programs located near smaller communities to provide training in gang and violence intervention. To offset minimum cell frequency violations of the chi square test, the population levels were combined into two variables; those populations less than and greater than 100,000. The analysis revealed no significant distribution differences for training requirements. One nonsignificant difference warrants attention, however, in program provision of continuing education opportunities. Specifically, programs located near larger cities more often offered continuing education opportunities for practitioners (chi^2 (1)=3.12, p=.08).

The results of this survey indicate nondoctoral, preservice training in gang and violence intervention is a lower priority for training programs than more traditional areas of behavioral intervention (e.g., ADHD, conduct problems, depression). Although the majority of programs endorsed greater inclusion of training in gang intervention and, moreso, training in violence prevention as areas which should receive greater attention, current preservice training in these areas generally is lacking. Of the two areas, violence prevention appears to take precedence over specific training in gang intervention across all areas of preparation. Thus, despite the recognition for training needs and growing concerns regarding youth violence in schools, many school psychologists are not receiving preservice training in gang and violence intervention.

Unfortunately, we did not assess the reasons programs may not offer training in these areas. In our own training program, violence prevention and intervention is integrated into the existing curriculum, with occasional elective coursework which focuses on violence and gangs. Thus, we follow the pattern exhibited in this survey. The primary reason for the lack of discrete coursework is perhaps the same as most training programs - meeting accreditation requirements and baseline preparation needs of students.

Another question we did not address is where (or if) practitioners are receiving training in violence and gang intervention. It is reasonable to assume that practitioners who see the need for further training engage in self-directed learning, including attending conferences and workshops. Recent 1997 conventions of the National Association of School Psychologists and the American Psychological Association have provided conference workhops and papers on violence issues. Practitioners also may purchase or access violence prevention programs which are relatively easy to implement (see Larson, 1994 for a review), or practitioner oriented books on violence interventions (e.g., Goldstein & Conoley, 1997). It may also be that, despite the call for greater activity of school psychologists in violence and gang prevention, school psychologists are busy with other duties such as assessment which preclude their involvement. Indeed, school psychologists often are overloaded with referrals and assessments which, in Catch 22 fashion, detract from their time and ability to work toward prevention and intervention for behaviors which otherwise may end in a referral for academic or behavioral problems.

In conclusion, gang and violence prevention and intervention are clearly identified as nationwide concerns (APA, 1993), however, current training in these areas apparently is lagging behind stated needs. Perhaps as exceptional education requirements move from a placement model to an intervention-based model, school psychologists will be freed from extensive paperwork and referrals to use valuable time to address these concerns. Until then, preservice training in gang and violence intervention probably will continue as a secondary priority.

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Table 1. Populations of Cities Near Training Programs

less than 25,000	16%
25,000 to 50,000	16%
50,000 to 100,000	16%
100,000 to 1,000,000	31%
1,000,000 to 5,000,000	13%
more than 5,000,000	6%

Table 2. Percentages of Programs Offering Intervention Training for Various Childhood Behaviors

	n	Required	Elective	Within purview	Not w/in purview	n	Course Work	Practicum	Internship
ADHD - Direct Treatment	82	84	12	4	0	85	91	68	68
ADHD - Consultation	82	87	13	0	0	85	89	75	78
ADHD - Parent Mgmt. Skills Training	79	65	23	10	3	84	73	51	58
Anger Management Training	80	39	34	21	6	84	60	45	33
Conduct Problems - Direct Treatment	81	86	12	1	0	85	88	69	69
Conduct Problems - Consultation	82	89	9	2	0	85	93	73	71
Conduct Problems - Parent Mgmt. Skills Training	80	65	18	14	4	84	68	50	54
Depression - Treatment	81	80	14	4	2	84	86	45	56
Depression - Consultation	82	80	11	6	2	85	89	48	58
Divorce/Family Change Treatment	80	48	28	20	5	83	73	40	42
Drug and Alcohol Abuse - Prevention	79	42	30	20	8	83	70	30	35
Drug and Alcohol Abuse - Treatment	77	26	40	22	12	81	60	27	31
Gang Involvement - Primary and Secondary Prevention	75	29	21	39	11	81	49	22	30
Gang Involvement - Treatment	75	17	27	41	15	81	38	20	26
Sexual Abuse Prevention/Protective Behaviors	78	51	21	21	8	82	71	33	37
Social Skills Training	78	81	14	4	1	82	85	60	62
Violence Prevention/Safe Schools	77	49	22	21	8	82	67	37	43

Note. Respondents did not uniformly complete the survey, therefore sample size varied for each item. Values are rounded percentages of the n who responded to a given item.

Table 3. Percentages of Programs Training in Gang and Violence Prevention

	n	Agree	Agree with reservations	Tend to disagree	Disagree
Understanding the history, organization, and motivational structures of youth gangs	88	49	40	9	2
Provide discrete preservice training in prevention and intervention procedures					
Youth Gangs	87	13	44	36	8
School Violence	87	36	36	23	6
Integrate prevention and intervention curricula into existing preservice prevention and intervention training					
Youth Gangs	88	43	44	11	1
School Violence	88	65	33	1	1
Provide continuing education training opportunities for practitioners into existing preservice and intervention training					
Youth Gangs	88	45	35	15	5
School Violence	87	59	26	13	2

Note. Values are rounded percentages.